

# Public Health translation manual

## Guidelines, best practices, resources and maps

翻譯

la traducción

Перевод

la traduction

翻訳

This document is a guide for Public Health workforce members who are translating materials. This document outlines best practices in translation and is a supplement to the Translation Policy for Public Health - Seattle & King County. Programs must refer to the Translation Policy and Procedures for translation requirements.

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## 1. Pre-translation steps

- A. Evaluating documents to translate as required by the Translation Policy.** There is a significant number of residents within King County who are low English proficient. It is important to provide translations so that all communities can have equal access to health information.

Public Health's Translation Policy provides guidance on which documents should and which documents **must** be translated and the quality assurance that must happen.

1. Public Health will make a concerted effort to translate materials and to make sure these materials are culturally and linguistically competent. (Translation Policy 6.2)

The section of this manual called "Evaluating other documents to translate" describes criteria to help programs decide when and what materials to translate, above and beyond those required by the policy. These criteria include: critical message, frequency, availability, emergency, literacy level and consistency and longevity.

2. A document must be translated into a target language when the target audience is a specific community or group with limited English proficiency. (Translation Policy 6.4)

Do you have material that was developed for a specific community that has a limited ability to speak, read, write or fully understand English?

**If you answered "yes" to the above question, then you must translate your material into the written language of the target audience.**

Example: You are creating a brochure about family planning for women in the Vietnamese community because this particular community is under-utilizing family planning services. According to your contacts this target audience needs written materials to be in Vietnamese to fully understand the information. Your material must be translated into Vietnamese. \*example is fictional

3. A document must be translated into at least Spanish when:

- It is Health Education Material.
- The target audience is residents throughout King County
- The Health Education Material is less than 450 words. (450 words = one page, single spaced, text only document).

(Translation Policy 6.5)

Do you have health education material such as a brochure, poster, booklet/pamphlet, bus sign, billboard, and print and broadcast advertisement?

Is your material targeting residents living throughout King County?

Is the word count of the educational material less than 450 words?

**If you answer “yes” to all of the above questions, then you must translate your material into Spanish.**

Example: You are developing a campaign to encourage hand-washing. You are creating educational materials for buses and bathrooms. You are targeting sites throughout King County. Your word count for each item is 50 words. You must translate your materials into at least Spanish.

4. A document must be translated into a language when:

- It is Health Education Material.
- The target audience is residents in a neighborhood or city.
- 5% or more of this neighborhood or city’s population speaks the language. (See language maps at the end of this manual)
- The Health Education Material is less than 450 words. (450 words = one page, single spaced, text only document).  
(Translation Policy 6.6)

Do you have health education material such as a brochure, poster, booklet/pamphlet, bus sign, billboard, and print and broadcast advertisement?

Is your material developed for a specific neighborhood or city in King County (e.g. White Center, Bellevue, Federal Way)?

Is your word count less than 450 words?

**If you answer “yes” to all of the above questions, then you must translate your material.** Look at Language Maps available in Spanish, Vietnamese, Russian, African Languages, Chinese, and Korean to determine if your city or neighborhood has more than 5% of the population speaking these languages.

Example: You are working on a project for Environmental Health addressing education about Duwamish River contamination. As part of this project you have developed signs that will be placed around the South Park neighborhood warning residents not to eat certain fish from the river. In this neighborhood more than 5% of the population speaks Spanish and Vietnamese. Your word count for the signage is 30 words. You must translate your signs into both Spanish and Vietnamese.

5. Although translation is only required of certain documents and Health Education Materials that are 450 words or less, translating additional documents is highly encouraged. (Translation Policy 6.7)

**B. Evaluating other documents to translate.** The following criteria can help programs decide which additional documents should be translated. Answering “yes” to some of the following criteria is a good indication that you should translate the material.

1. Critical message: Do you have an important or critical message you need to deliver to all residents of King County?
2. Frequency: Has this material been requested in other languages many times?
3. Availability: Is a translated version of this material **not** available from other outlets? Check to see if other public health departments, Washington State Department of Health or the Centers for Disease Control & Prevention (CDC) already have this material available in other languages.
4. Emergency: Is it an emergency situation? Is this a critical message that needs to be disseminated to the entire community or to a specific language group?
6. Literacy level: Is the target audience literate or do they typically receive messages in written format?
8. Consistency and longevity: Will the content be consistent over a long period of time? Messages that change frequently may be less suited for translation, when compared to longer-lasting messages.

**C. Quality and accuracy.** To ensure accuracy and quality in all translations, department staff should thoroughly review English materials, prior to translation, in order to assess whether information is well written, clear, and accurate. If appropriate, verify accuracy of information with subject matter experts.

- ✓ Use clear, concise, simple language that is easily translatable. Think about whether the concept you are presenting exists in other cultures.
- ✓ Make sure your message is culturally competent. For example, there are community specific food pyramids that reflect the diets of specific ethnic communities. Using examples of these familiar and culturally-appropriate foods when messaging about healthy food choices would be culturally competent. If you are unsure if your material is culturally appropriate, you should check your messaging and images with a community partner that works with that population or a member of the target audience.
- ✓ Avoid idiomatic expressions or colloquialisms (i.e., expressions or sayings which do not have the same meaning in other languages/cultures). If certain text is unavoidable, identify and define the text in the Translation Request Form. Work with your translators to find best possible translation given your contextual meaning.

**D. Readability.** The goal of readability testing is to determine if the educational material you produce is written at a level that exceeds your audience's ability to understand it. Most readability tests are based on two factors: word difficulty and sentence length.

The most common formulas are the Flesch Reading Ease/Flesch-Kincaid Grade Score, the SMOG test (found at <http://www.med.umich.edu/pteducation/read.html>) and the Fry Readability Graph (found at <http://www.med.virginia.edu/patient-ed/provider/read.html>).

If your document is in electronic format, you can easily check its English readability before translation using the readability testing tools available in Microsoft Word,

including both the Flesch and Flesch-Kincaid tests. To use these tools, click on the spell-check icon in your main toolbar. When the correction window appears, click on the Options button. A control panel will appear; check the "Check readability statistics" box, and then click "OK."

After the grammar and spell check are completed, you will see a screen titled "Readability Statistics," which will give you information on "Counts" (number of characters, words, sentences and paragraphs), "Averages" (sentences per paragraph, words per sentence, and characters per word), and "Readability" (percent of passive sentences, Flesch Reading Ease score, and Flesch-Kincaid Grade Level score).

It is suggested that all translated materials should not exceed a 5<sup>th</sup> grade reading level. Most audiences will be able to fully understand the language at this level.

Keep in mind that none of the readability formulas measures whether or not the reader understands the intended meaning. Readability formulas are most effective when used in combination with direct testing of your materials with your target audience.

- E. Timeline.** Time needed to complete a translation varies depending on how many words you are translating, who is completing your translation, and whether or not you need desktop publishing services. A 300-word document can be translated/edited/proofread in about 4-6 business days. Allow 1-2 additional days for desktop publishing/formatting, depending upon complexity of project. A more accurate timeline can be provided by the translators along with the cost estimate.

For rush orders or emergency translation through a translation vendor, most documents can be delivered within 24 to 48 hours. This service is subject to rush order fees. Contact translators for more information.

- F. Budget.** Contact the Interpretation/Refugee Screening manager for pricing when the translations will be done by Public Health staff. When using a translation vendor, prices may vary depending on the vendor you choose. Costs include but are not limited to:

1. Translation charge is the word count (either original English word count or target language word count) multiplied by the charge per word (dependent upon target language)
2. Desktop publishing costs vary depending on vendor and services requested
3. Project management fees = 5% - 10% of total cost (some vendors do not charge this fee)
4. Rush order if the document must be translated in 24 – 48 hours.
5. Quality Assurance services from a second vendor = word count x charge per word (See Post Translation for more information)

See Public Health's list of translation vendors for current pricing or contact vendor for more details.

## 2. Translation Request Form

Fill out the Public Health Translation Request Form with all appropriate information and turn this in to Public Health's Interpretation/Refugee Screening manager or translation vendor when requesting services. This information will help them find appropriate translators and will supply translators with the necessary information to meet your specific projects needs. Answering these questions will ultimately help you to receive a quality translation.

The following information will help guide you through the worksheet process:

- A. Target language.** If your material is required by policy to be translated, choose the target language based on section 1A above. To decide target languages of materials that fall outside of the policy requirements, the following three tiers of primary languages spoken in King County were developed.

The primary language tiers are *only* guidelines for document translation. Programs, at their own discretion, may translate into languages other than the primary languages or languages that are different from this ranking if there is a known need. When targeting audiences that live in a specific geographic region, refer to the language maps (available in Spanish, Vietnamese, Russian, Chinese, Korean, and African languages only, due to limited data).

### Primary languages

Primary languages are languages other than English spoken by the largest number of King County residents, based upon data from the 2006 American Community Survey, US Census Bureau, King County WIC interpretation requests (2005, 2007), and Public Health Clinic visits (2006-2007).

**Tier 1-** The following are the top six languages spoken in King County. These languages appeared at the highest frequency in available data—between 5 and 315 interpretation requests per day from WIC or Public Health clinics, or more than 15,000 people in King County speak English “less than very well.” Availability of clear, consistent data allows these languages to be ranked.

1. Spanish (Latin American)
2. Vietnamese
3. Russian
4. Somali\*
5. Chinese (Traditional)\*\*
6. Ukrainian

\* When creating materials for the Somali speaking community, oral communication or the use of pictorial messaging is preferred to strictly written communication.

\*\* The predominant spoken languages in King County are Cantonese and Mandarin but the predominant written language is Chinese – Traditional.

**Tier 2-** The following six languages are of moderate frequency, between 1 and 4 interpretation requests per day or 2006 American Community Survey data estimates more than 8,000 people in King County speak English “less than very well.”

Amharic, Punjabi, Arabic, Korean, Khmer, Tagalog

**Tier 3-** The following eight languages are of low frequency between .9 and .4 interpretation requests per day (8-20 per month) or 2006 American Community Survey estimates more than 5,000 people speak English “less than very well.”

Oromo, French (West Africa), Bosnian, Tigrigna, Portuguese (Brazil), Laotian, Farsi, Hmong

**B. Target audience.** Describe desired target audience as narrowly and clearly as possible. Identify primary audiences (people to whom messages are targeted) and secondary audiences (gatekeepers and others in the community with a stake in your project).

- ✓ Language: Even within languages there are differing dialects. It is important to be as specific as possible when describing the dialect of your target audience (e.g., Mexican Spanish).
- ✓ Literacy level in target language: (Low-literacy = 5<sup>th</sup> grade reading level)  
It is important to write your English version in the appropriate reading level for your target audience **before** having it translated. A well-trained translator can assess the reading level of the original text and translate accordingly.
- ✓ Other information that could shape messaging (Cultural issues, demographic information, health status, average age).

**C. Design, format, and distribution.** What formats and media (e.g., brochure, poster, magnet, phone card, radio spot, busboard, cabtop ads) are the best ways to deliver your message? Try to think creatively about this.

- ✓ Design your material to fit your target audience. Make sure your design is culturally competent. Use images that reflect the community, and when possible use a medium that relies on pictorial messaging.
- ✓ Design your material to fit the specified media channel you want to utilize.  
[Basic Guidelines for the Design of Print Materials](#)
- ✓ Give your translation vendor detailed information on how you will use this material. Will it be spoken or in written form? (e.g., Is this material for a hotline script, newspaper advertisement, brochure, or fact sheet?)
- ✓ Is your target audience a specific ethnic group? If so, is ethnic media an appropriate medium for your messaging? Check with local ethnic media to see what formats of materials they are able to accept? (e.g., InDesign, Word, Publisher, etc.) For more information about ethnic media contact the Communications Team.
- ✓ Are you developing an advertisement, brochure or other material that is saved in a file other than Microsoft Office software? You may need desktop publishing services from your translation vendor. Your vendor will need this information before they



begin the translation. If possible, try to use standard software in your material development. **Note:** There is an additional fee charged by vendors for desktop publishing services.

- ✓ Make sure you leave room for text expansion. Many target languages can expand your text space by up to 30%.
- ✓ For ease of identification, it is important that all translated documents include the name of the document in English, the language and date translated in the footer.

**D. Graphics standards: Use of Public Health logo.** There is one standard acceptable version of the Public Health logo, and it is available in both English and Spanish. The Spanish logo is used for all Spanish only documents. The English logo is used for bilingual documents and all other language documents. Your translation vendor may request a copy of the Public Health - Seattle & King county logo. Appropriate files are on the Public Health Employee Webpages', under [graphics & logos](#).



### 3. Choosing Public Health translators or a translation vendor

According to 6.8 of the translation policy; “All translations will be performed by a certified translator and reviewed by another certified translator for quality assurance. The certification must be in the target language for the document.”

In addition, translations “may be completed by internal staff or a translation vendor. Certified internal staff shall be utilized before a vendor whenever practical” (Translation Policy 6.9).

Therefore, programs have two options.

- A. Programs can contact the Interpretation/Refugee Screening manager who will assess the availability of two certified translators (a translator and reviewer). Currently, Public Health only has certified translators for Spanish.
- B. Programs can choose to have a translation vendor translate their material. Through a competitive process, Public Health - Seattle & King County selected various agencies to provide quality translation services in 2008. Each translation vendor had to meet the following qualifications:
  - Ability to translate health information in a large variety of languages but not limited to Spanish, Vietnamese, Chinese, Korean, Russian and Somali.
  - Ability to provide quality assurance and review by a second qualified translator.
  - Translators must have health translation specialization and/or prior work experience in health field with knowledge of health specific terminology.
  - Translator requirements include domestic/local translators able to provide localized translations, native speaker(s) of target language(s), American Translator Association certified, and at least 5 years experience.

See Public Health - Seattle & King County’s approved list of translation vendors. (Appendix 9.3)

## 4. Working with a translation vendor

- ✓ **Translation estimates.** Once you have delivered your translation worksheet and appropriate files to your translation vendor, you will receive a cost estimate via email from the project manager. **Note:** This is **not** your invoice for services. This estimate should provide you with an accurate cost breakdown and delivery time. The estimate must be signed by the appropriate Project/Program Purchasing Authority. Fax the signed estimate back to the project manager before your translation vendor will begin working on your translation.

If changes are made to the project that affect pricing after a signed estimate is returned to the translation vendor, you should receive an updated cost estimate from your project manager that must be signed and faxed.

- ✓ **Invoices.** All invoices to be paid should be delivered after you receive your final translated document. Invoices should not be sent for payment until materials are received in their final form.
- ✓ **Follow-up with translation vendor.** It is important to follow-up with your translation vendor during the translation process. Keeping open lines of communication helps to ensure better quality translation and faster turn-around times.
- ✓ **File Format.** Depending upon your target language, you may need to request your files in PDF format. For example, most computers are **not** equipped with Vietnamese fonts and although you can open the document in Word, the font you see may be incorrect. If you receive this as a PDF file the font will stay intact and is readable by anyone with Adobe Acrobat Reader.

## 5. Post translation: Quality assurance review

### How to assess the quality and usability of your translated documents

It is encouraged that all translations go through a third-party quality assurance review. If you had your translation completed by a translation vendor, this is an additional layer of review since vendors already provide a reviewer for all translations. If you chose to have your material translated by an internal employee certified in translation, this is an additional layer of review beyond the second certified translator who already reviewed the translation. There are three ways you may choose to have this third-party quality assurance review completed.

1. **Translation Vendor.** You may choose another vendor from the Public Health approved list of translation vendors to complete the quality assurance review. This is charged at a different rate than basic translation. Please see the list of translation vendors for more details.

2. **Certified Translator.** Other than requesting a quality assurance review from an additional vendor, you may have your material(s) reviewed by internal staff who are certified in the target language. Contact the Interpretation/Refugee Screening manager.

3. **Target Audience.** Another option is to have your material reviewed by someone from your target audience. If you have relationships established with local community-based organizations that serve your target population, you can ask them to review your translated materials for cultural relevancy and quality assurance. Please be courteous to the fact that many staff at community based organizations are very busy and may not be able to review your materials in a timely manner. It is strongly recommended that these community-based partners receive compensation for this service.

Be mindful that translation is seen as both an art and a science to the translator. No two translators will translate a document in the same way. Any feedback to your translator/vendor should be about issues concerning cultural competency, readability, or understanding for the target audience, and there may be more than one way to correctly and effectively convey a message.

## 6. Online translation resources:

### A. Translated health materials: King County, Washington State and United States

- ✓ **Public Health – Seattle King County**  
<http://www.kingcounty.gov/healthservices/health/languages.aspx>  
Public Health - Seattle & King County offers translated materials in multiple languages available for download.
- ✓ **Washington State Department of Health**  
[http://www.doh.wa.gov/translated\\_materials.htm](http://www.doh.wa.gov/translated_materials.htm)  
The state Department of Health offers several publications and materials in languages other than English.
- ✓ **Centers for Disease Control and Prevention**  
<http://www.cdc.gov/Other/languages/>  
The CDC offers materials translated into Spanish, German, Italian, Russian, Vietnamese, Chinese, French, Korean, and Tagalog.

### B. Selected web resources

The following online resources are provided by Public Health - Seattle & King County's Digital Librarian. The web resources are screened for quality using the following criteria: authority or sponsorship, accuracy, objectivity or lack of bias, coverage or comprehensiveness, currency or 'up-to-datedness', and design or usability.

For more information see "A User's Guide to Finding and Evaluating Health Information on the Web" (<http://www.mlanet.org/resources/userguide.html>) and "Criteria for Evaluating Web Sites" ([http://healthlinks.washington.edu/howto/finding\\_healthinfo.html](http://healthlinks.washington.edu/howto/finding_healthinfo.html)).

If you have additional questions, please ask the Digital Librarian (<http://info.kingcounty.gov/about/contact/Default.aspx>).

- ✓ **American Indian Health**  
<http://americanindianhealth.nlm.nih.gov>  
National Library of Medicine's portal for information on the health of Native Peoples of the United States.
- ✓ **Asian American Health**  
<http://asianamericanhealth.nlm.nih.gov>  
National Library of Medicine's portal for information on the health of Asian Americans in the United States.
- ✓ **Asian Pacific Islander Cancer Education Materials Tool (American Cancer Society)**  
[http://www.cancer.org/acmmain/\(to2gnb55v1eo3my0a5dcq155\)/DefaultACS.aspx](http://www.cancer.org/acmmain/(to2gnb55v1eo3my0a5dcq155)/DefaultACS.aspx)

Cancer Society cancer education resources in over a dozen Asian and Pacific Islander languages.

✓ **Consumer Health Information in Many Languages Resources**

<http://nnlm.gov/outreach/consumer/multi.html>

The National Library of Medicine's list of websites offering health information in multiple languages.

✓ **Cultural Competence Resources for Health Care Providers**

<http://www.hrsa.gov/culturalcompetence/>

The Health Resources and Services gateway to cultural competence resources, including assessment tools, training opportunities, culture and disease specific information.

✓ **CulturedMed**

<https://culturedmed.sunyit.edu/index.php/home>

Health materials in languages other than English

✓ **The Cross Cultural Health Program**

<http://www.xculture.org/>

Cross Cultural Health Program's website provides cultural competency and medical interpreter training materials, links to national programs, and a resource library. The "Voices of the Communities" profiles deepen the discussion by providing information from a specific Seattle-area community. The CCHCP developed these profiles to provide a forum for underserved communities to interact with the health care community. The profiles were written by or in consultation with members of the profiled community. <http://www.xculture.org/Publications.php>

✓ **EthnoMed**

<http://ethnomed.org/>

Information about cultural beliefs, medical issues and other related issues pertinent to the health care of recent immigrants to Seattle or the US. Patient education resources are available in several languages.

✓ **Health Information Translations**

<http://healthinfotranslations.com/index.php>

Offers a large collection of patient education materials on several topics and in many languages.

✓ **Healthy Roads Media**

<http://www.healthyroadsmedia.org/>

Healthy Roads Media provides a range of health topics translated into several languages in a number of formats. This site has material translated into 17 languages.

✓ **Immunization Action Coalition**

<http://www.immunize.org/printmaterials/translations.asp>

Immunization information in over thirty languages.

✓ **Joint Commission: Hospital, Language and Culture Resources**

<http://www.jointcommission.org/PatientSafety/HLC>

The Joint Commission's very comprehensive list of groups addressing culturally and linguistically appropriate healthcare services.

✓ **Languages of the World**

<http://www.nvtc.gov/lotw/languageList.html>

Learn more about specific languages' history, status, sound system, grammar, vocabulary, writing and much more.

✓ **Non-English Language Information on Seattle.Gov**

<http://www.ci.seattle.wa.us/html/citizen/language.htm#index>

Service and community information in over 26 languages on topics such as civil rights, emergency preparedness, housing, utilities, and human services.

✓ **Refugee Health Information Network (RHIN)**

<http://rhin.georgetown.edu/DesktopDefault.aspx?tabid=25&moduleTitle=All%20Documents%20that%20I%20can%20view...&showFilteringOptions=true>

RHIN has created a database of quality multilingual, public health resources for those providing care to resettled refugees. See their Documents link for a searchable database of translated health education materials.

✓ **Rehabilitation Provider's Guide to Cultures of the Foreign-Born**

<http://cirrie.buffalo.edu/monographs/index.php>

Specific information on cultural perspectives of foreign-born persons in the U.S., especially recent immigrants. Public health providers may find this information helpful in addressing the needs of foreign-born recipients of health services.

✓ **Salud in Acción**

<http://saludenaccion.org/>

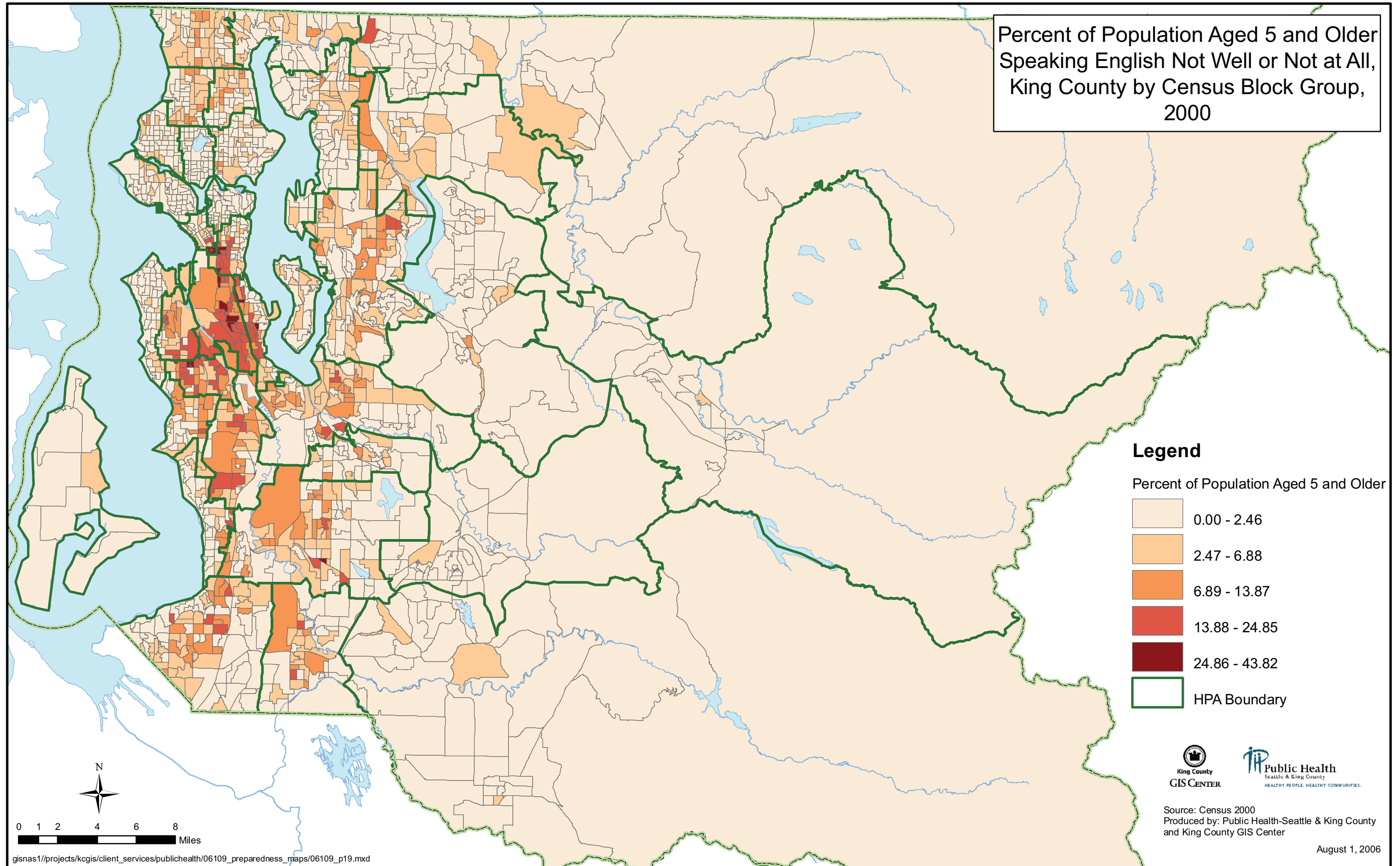
Seeks to address the community public health issues and needs of the Hispanic/Latino community.

✓ **Seattle Public Library Languages Resources**

[http://www.spl.org/default.asp?pageID=collection\\_db\\_list&dbPage=24](http://www.spl.org/default.asp?pageID=collection_db_list&dbPage=24)

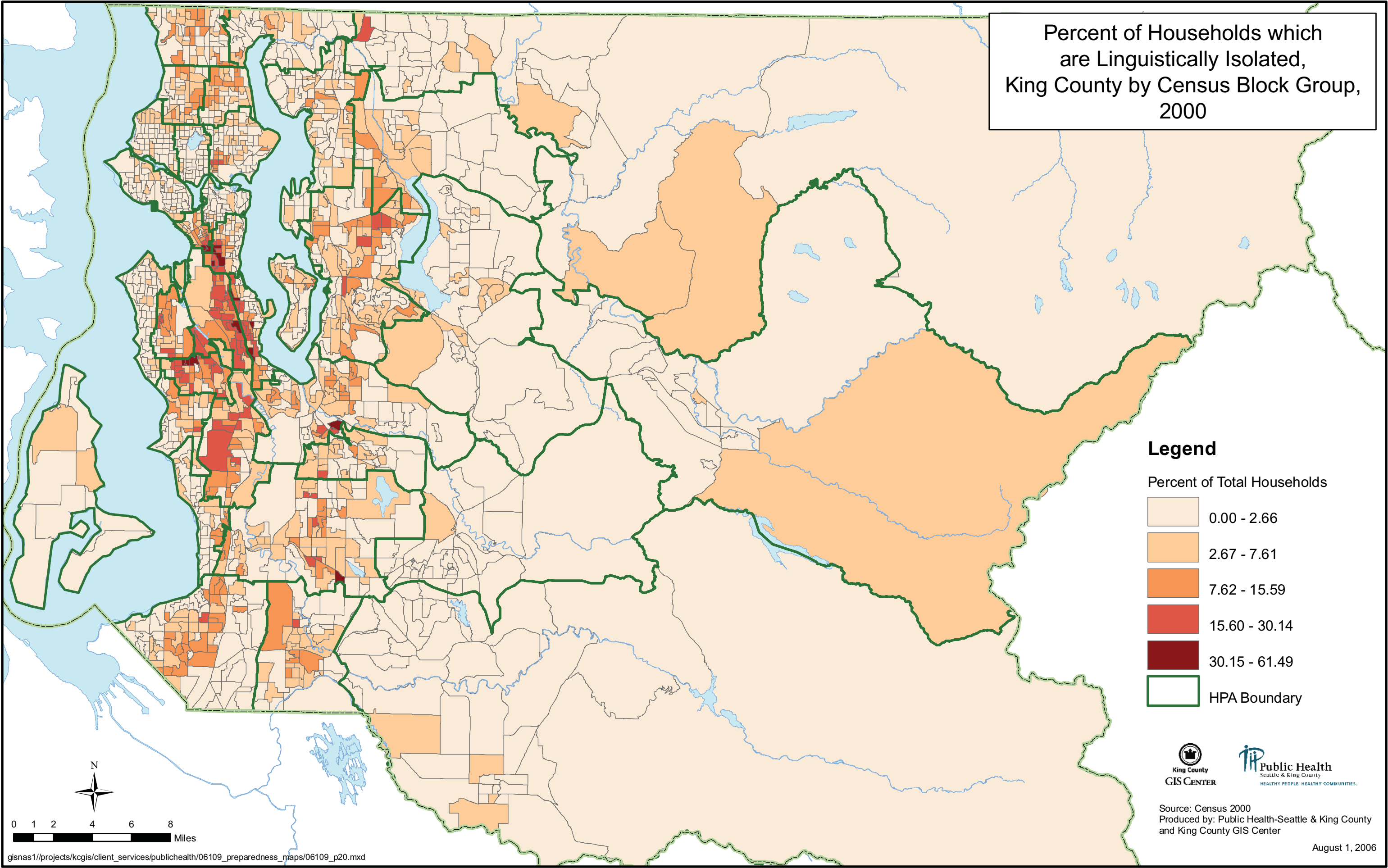
The Seattle Public Library provides access to a wide range of online multilingual resources

Percent of Population Aged 5 and Older  
Speaking English Not Well or Not at All,  
King County by Census Block Group,  
2000

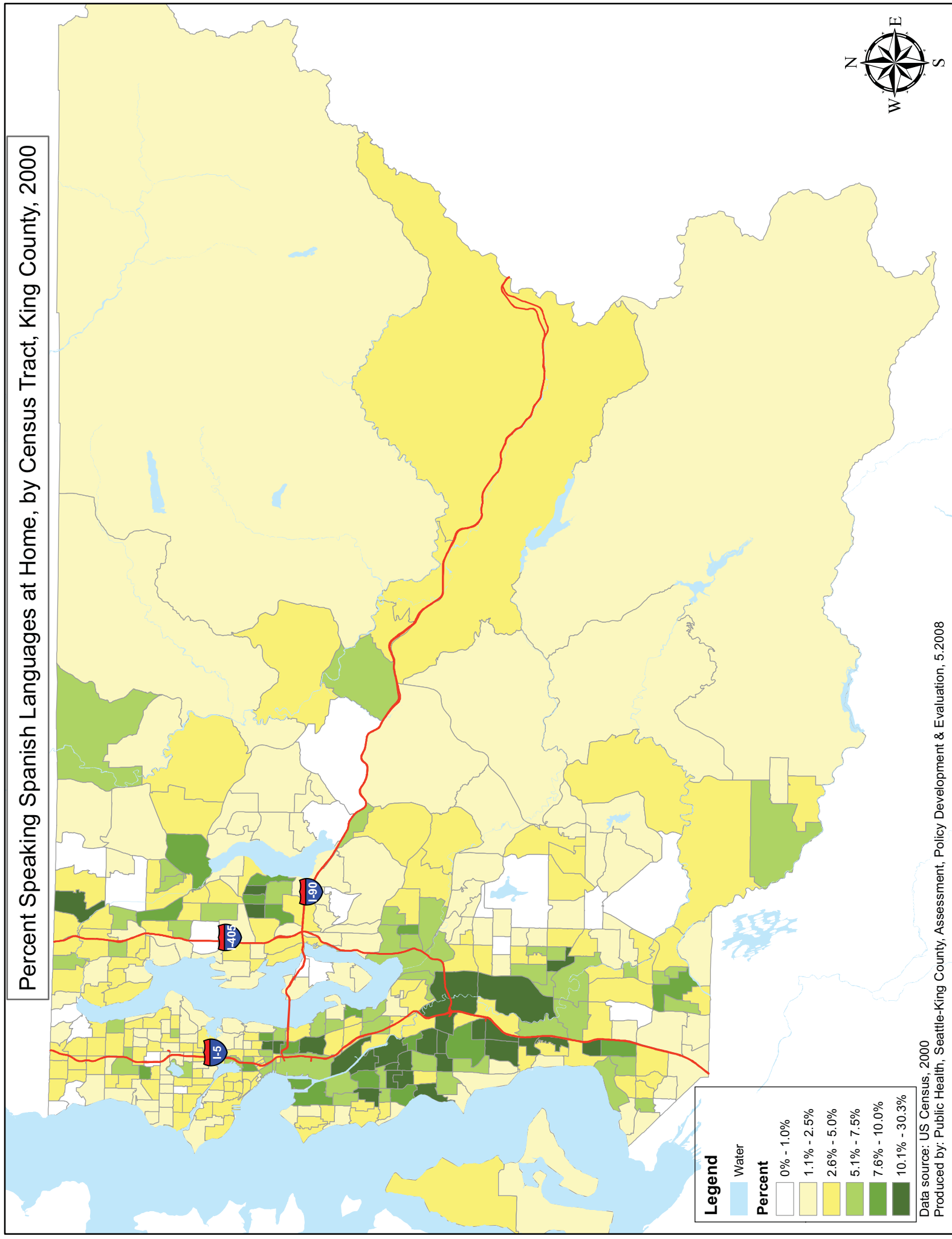




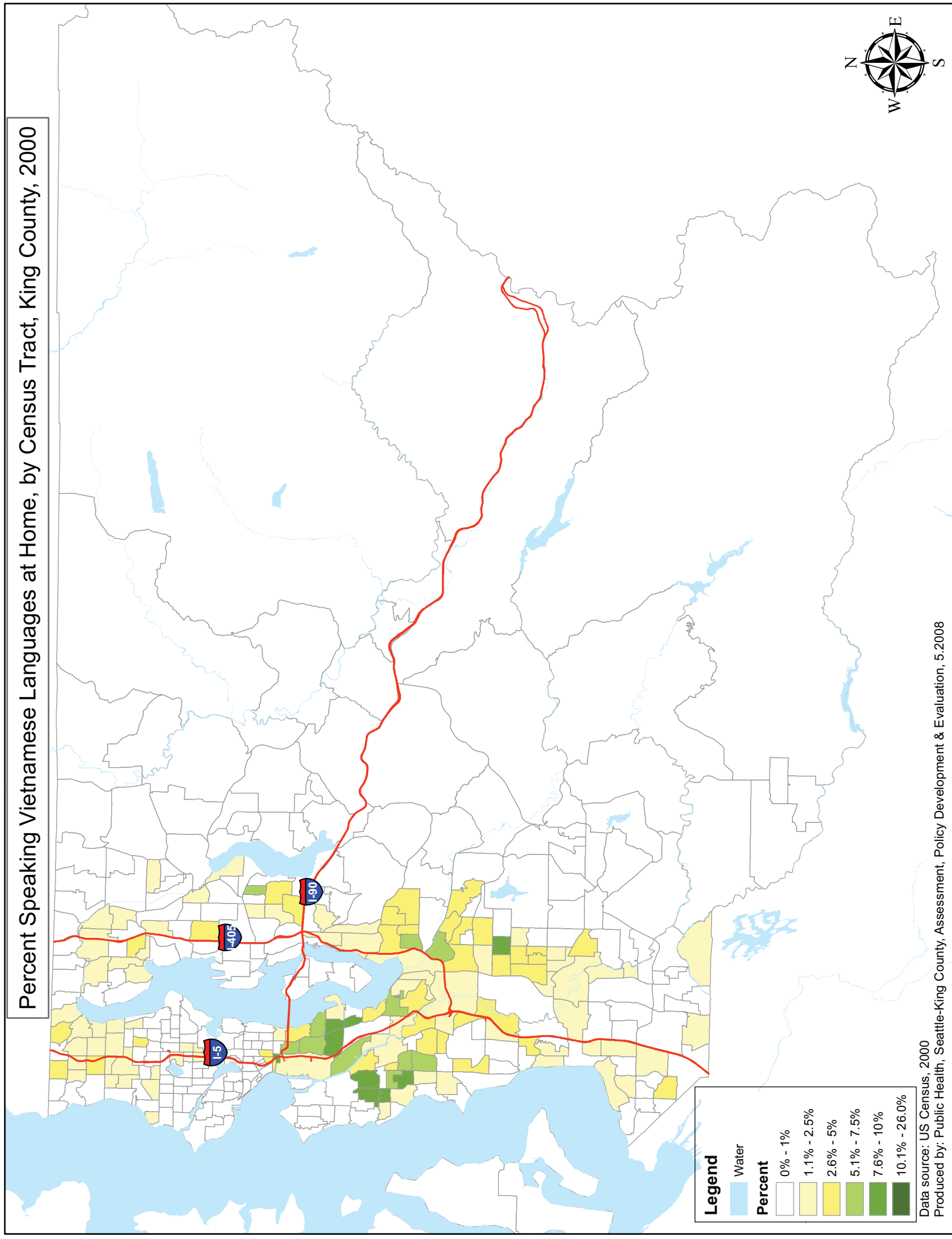
Percent of Households which  
are Linguistically Isolated,  
King County by Census Block Group,  
2000



Percent Speaking Spanish Languages at Home, by Census Tract, King County, 2000



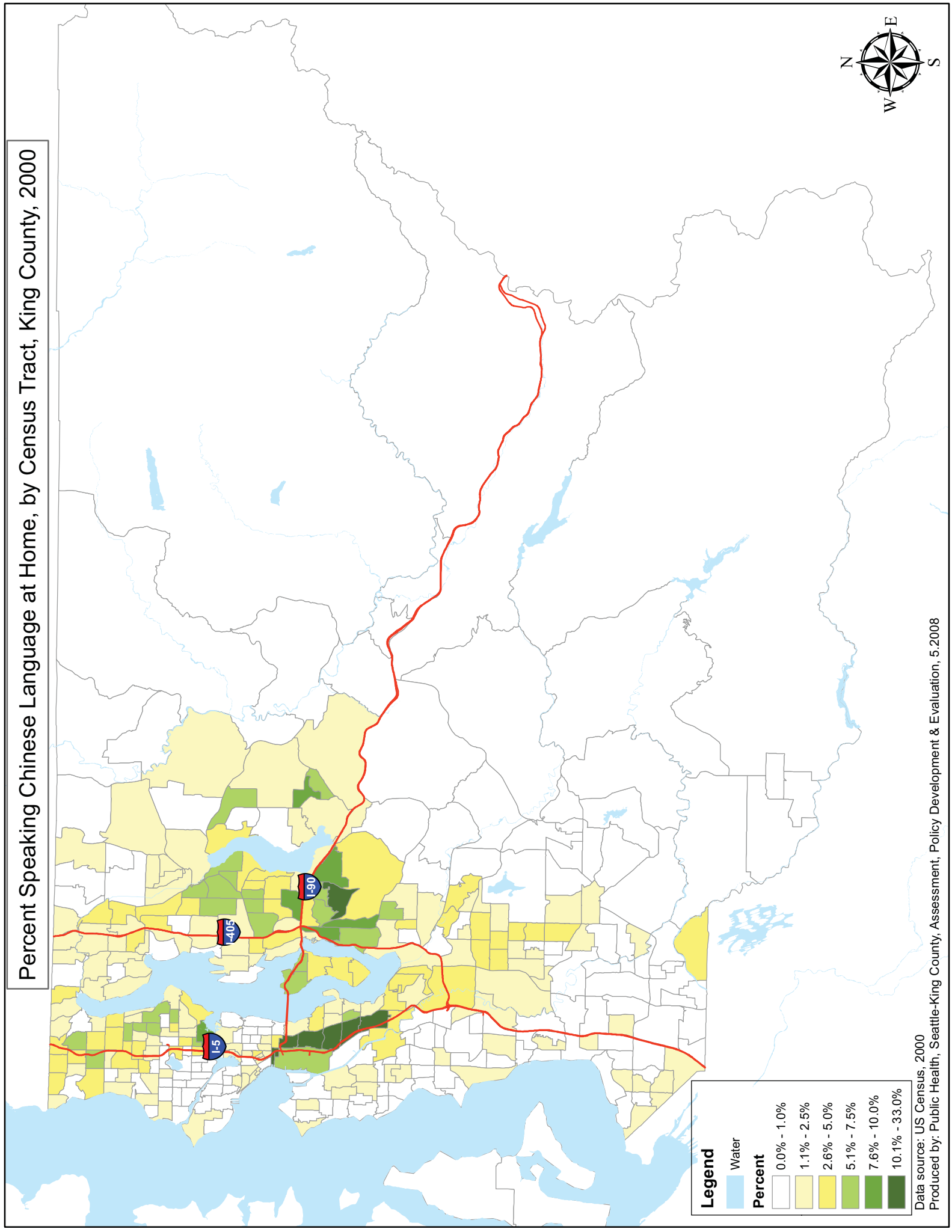
# Percent Speaking Vietnamese Languages at Home, by Census Tract, King County, 2000



Data source: US Census, 2000

Produced by: Public Health, Seattle-King County, Assessment, Policy Development & Evaluation, 5.2008

# Percent Speaking Chinese Language at Home, by Census Tract, King County, 2000



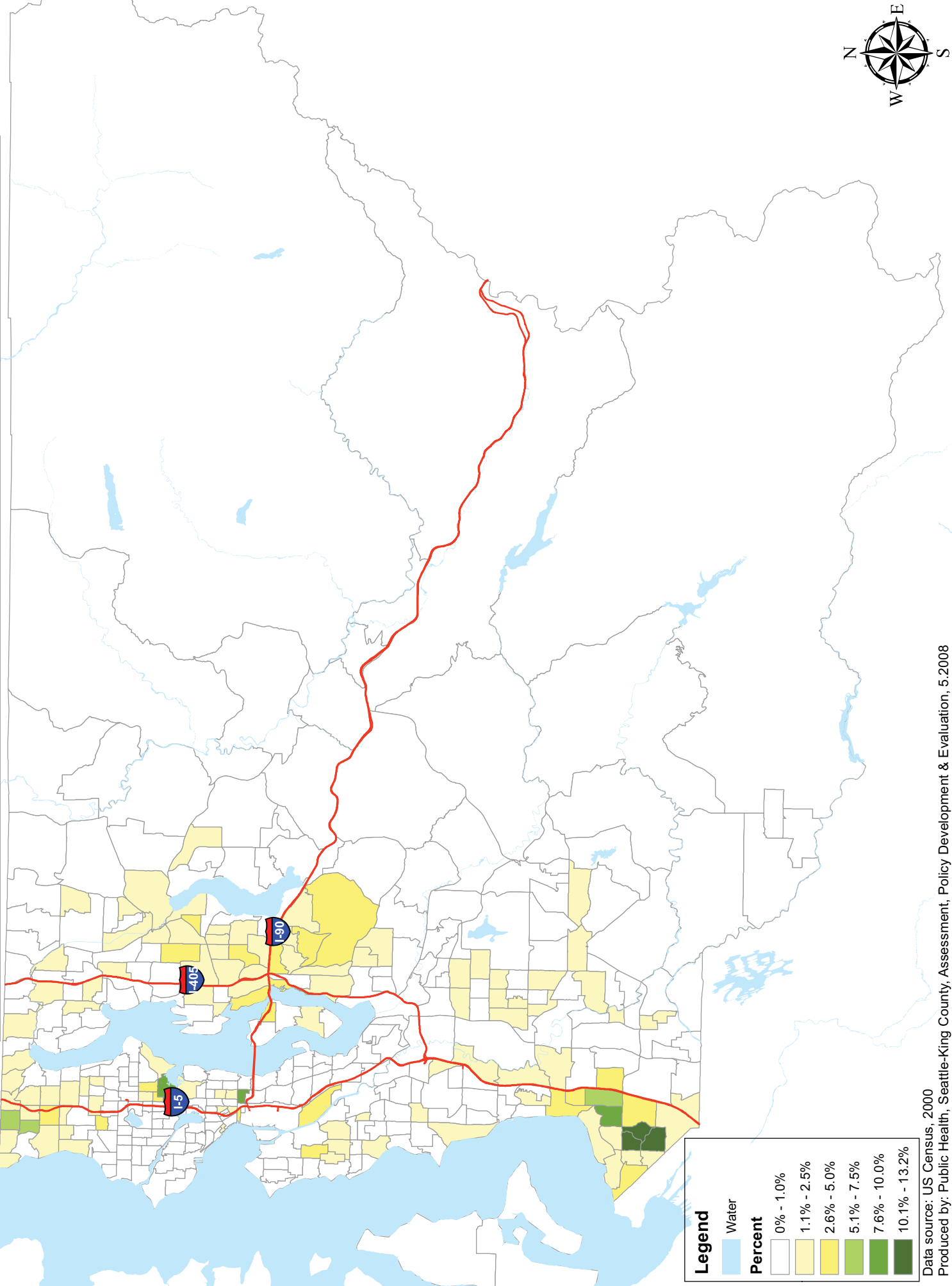
## Legend

Water

## Percent

- 0.0% - 1.0%
- 1.1% - 2.5%
- 2.6% - 5.0%
- 5.1% - 7.5%
- 7.6% - 10.0%
- 10.1% - 33.0%

Percent Speaking Korean Languages at Home, by Census Tract, King County, 2000



**Legend**

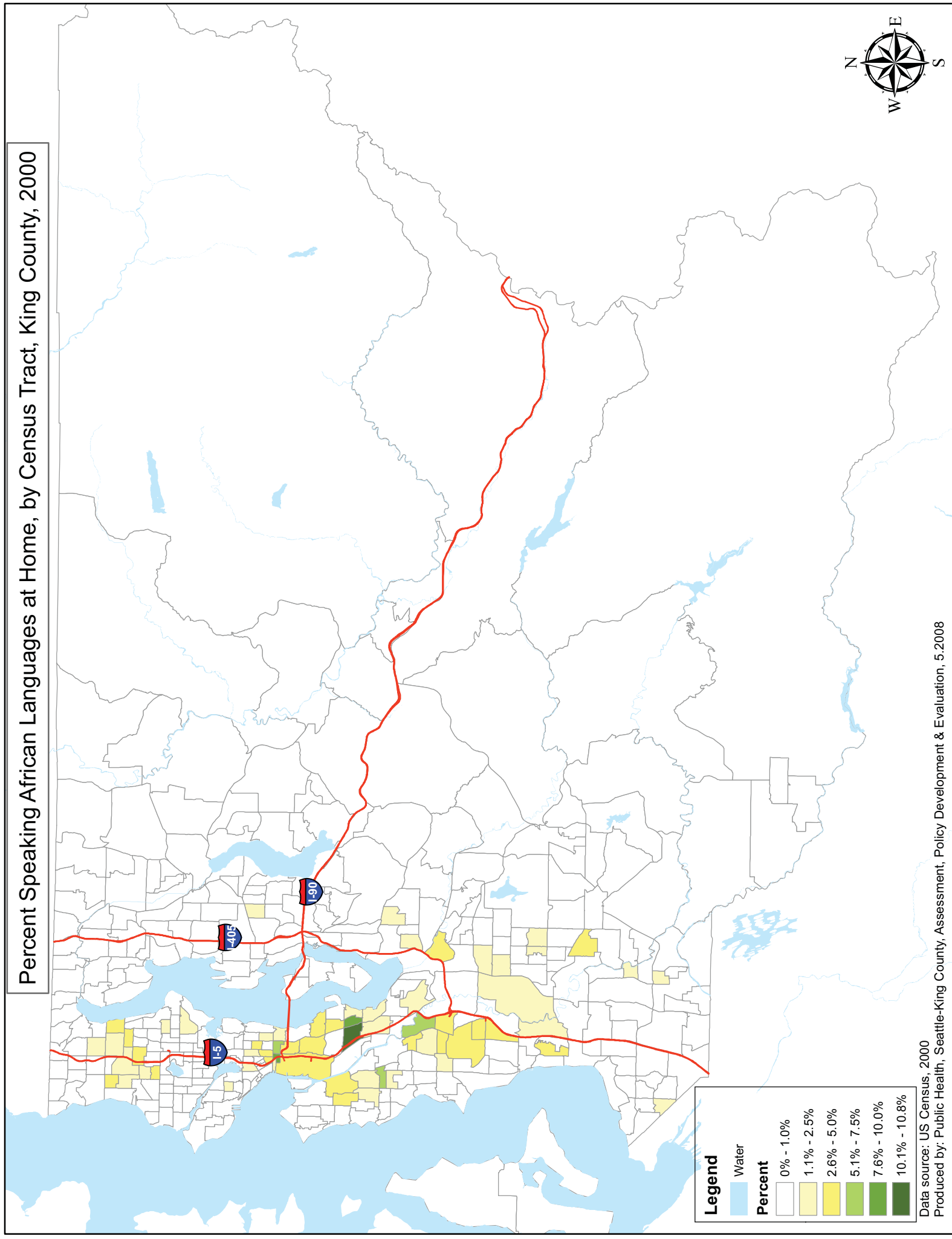
Water

**Percent**

- 0% - 1.0%
- 1.1% - 2.5%
- 2.6% - 5.0%
- 5.1% - 7.5%
- 7.6% - 10.0%
- 10.1% - 13.2%



# Percent Speaking African Languages at Home, by Census Tract, King County, 2000



# Percent Speaking Russian Languages at Home, by Census Tract, King County, 2000

